

ARKANSAS CONTINUING LEGAL EDUCATION BOARD

120 JUSTICE BUILDING, 625 MARSHALL STREET

LITTLE ROCK, AR 72201

Phone: (501) 374-1855 Fax: (501) 374-1853

APPLICATION FOR ACCREDITATION OF CONTINUING LEGAL EDUCATION ACTIVITY

1. Sponsoring Organization: _____ Sponsor #: _____
Address: _____ Phone #: _____
_____ FAX #: _____
E-mail: _____
2. Title of educational activity: _____

3. Date(s) & Location(s): _____
4. Registration Fee: \$ _____ 5. Writing surface available: __yes; __no
6. Delivery Method(s): __ faculty in room with participants; __ phone to broadcast site;
__ satellite; __ videotape presentation (requires moderator); __ **"Live"** interactive computer webcast
7. Advertised to: __ Lawyers; __ Clients; __ Others (specify, list %) _____
8. List any admission restrictions: _____
9. Is this an "in-house" activity? (Access limited to members of one private law firm): __yes; __no
10. Method of evaluation: __ participant critique; __ independent evaluator; __ none
11. Description of materials to be distributed: _____ total pages; __ before program; __ after program;
__ other
12. REQUIRED ATTACHMENTS to this application:
 - a. Time schedule (brochure, outline, description)
 - b. Table of contents or equivalent
 - c. Faculty name(s) & credentials (if not in brochure)
13. Total minutes of instruction, **excluding** breaks, meals or introductions:
General: _____ Ethics: _____

ETHICS MUST BE PRESENTED IN A DISTINCT SEGMENT AT LEAST 60 MINUTES IN LENGTH.

14. Approval by other states: granted by; _____ denied by; _____
 15. Submitted by: __ employee of sponsor/provider __ individual lawyer
- SPONSOR OBLIGATIONS: Sponsor acknowledges and agrees to comply with Arkansas CLE rules.
- Sponsor Representative: _____
- Signature: _____
- Title: _____
- Date: _____
- Attorney Name: _____
- Bar #: _____
- Address: _____
- Phone: _____
- Signature: _____